Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Ellective January 1, 2003												
·			S FILED - PART ((Column 1)		(Column 2)		SMALL TYPE	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(O				RAT	Ξ	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			10 minus 20=		* 6		X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =				X42:	_		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PE	RESENT				+140	_		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA			OR	TOTAL	
	С			- L		1 - ' '	OTHER	THAN				
		(Column 1)		(Colur	mn 2)	(Column 3)	SMA	LL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9	= [OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=	- 1		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140	=		OR	+280=	
	1, 6, 7, 9', (Column 1) (Column 1)						TOT ADDIT, F		-		TOTAL ADDIT, FEE	
						הטטוו. ר	LE L		•	ADDII, FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=	=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_		OR	+280=	
								ΓAL			TOTAL	
(Column 1) (Column 2) (Column 3)								EE L		•	ADDIT. FEE	L
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		[=	X\$ 9:	_		OR	X\$18=	
	Independent	*	Minus	***		=	X42=	}			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPEND			PENDEN.	T CLAIM		1	+		OR		
* If the certain column 1 is location the certain column 2 units "0" is column 2										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					found in the	app	ropriate box	x in col	lumn 1.	